

6-6-05

PTO/SB/30 (09-04)



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Request for Continued Examination Transmittal

Address to:
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Alexandria, VA 22313-1450

OFFICE OF PETITIONS

Application Number	10/072,354
Filing Date	02/06/2002
First Named Inventor	Joseph A. Kozlowski et al.
Art Unit	1625
Examiner Name	Janet Coppins
Attorney Docket Number	AL01381K

This is a Request for Continued Examination (RCE) under 37 CFR 1.1 14 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.1 14 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the LISPTO) on page 2.

1. Submission required under 37 CFR 1.1 14. Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

ii. ☐ Other _____

b. ☒ Enclosed

i. ☒ Amendment/Reply

ii. ☐ Affidavit(s)/ Declaration(s)

iii. ☒ Information Disclosure Statement (IDS)

iv. ☒ Other Pet. to Withdraw- 2 Pgs.; Req. for Contin. Exam - 1 Pg Post Card

2. Miscellaneous

a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.1 03(c) for a _____ (10 refs.)

b. ☐ Other _____

3. Fees

The RCE fee under 37 CFR 1.1 7(e) is required by 37 CFR 1.1 14 when the RCE is filed.

The Director is hereby authorized to charge the following fees, or credit any overpayments, to

a. ☒ Deposit Account No. 19-0365 I have enclosed a duplicate copy of this sheet.

i. ☒ RCE fee required under 37 CFR 1.1 7(e) \$790.00

ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17) _____

iii. ☐ Other _____

b. ☐ Check in the amount of \$ _____ enclosed

c. ☐ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Signature	<i>Th. A. Blinka</i>	Date	June 3, 2005
Name (Print/Type)	Thomas A. Blinka	Registration No.	44,541

CERTIFICATE OF MAILING OR TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.			
Signature	<i>Th. A. Blinka</i>	Date	June 3, 2005
Name (Print/Type)	Thomas A. Blinka		

This collection of information is required by 37 CFR 1.1 14. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT CASE: AL01381K

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Application of:
Joseph A. Kozlowski et al.

For Patent For:
CANNABINOID RECEPTOR LIGANDS

Serial No.: **10/072,354**

Filed: **02/06/2002**
-----X

Examiner: **Janet Coppins**

Group Art Unit: **1625**

Date: **June 3, 2005**

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Schering-Plough Corporation
Kenilworth, New Jersey 07033-0530

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JUN 08 2005

Request for Continued Examination Under 37 C.F.R. §1.114

OFFICE OF PETITIONS

Sir:

This is in response to the Notice of Allowance dated December 16, 2003, issued in connection with the above-identified application. Applicants are hereby filing a Request for Continued Examination under 37 C.F.R. §1.114, and a Supplemental Information Disclosure Statement under 37 C.F.R. §1.97(b)(4).

Respectfully submitted,

Thomas A. Blinka
Attorney for Applicant
Reg. No. 44,541

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PTO/SB/17 (12-04v2)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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Effective on 1210812004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 450.00)

Complete if Known

Application Number	10/072,354
Filing Date	02/06/2002
First Named Inventor	Joseph A. Kozlowski
Examiner Name	Janet Coppins
Art Unit	1625
Attorney Docket No.	AL01381K

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 19-0365 Deposit Account Name: SCHERING-PLOUGH CORPORATION

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing Fees (\$)	Search Fees (\$)	Examination Fees (\$)	Fees Paid (\$)
utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0		

2. EXCESS CLAIM FEES

Fee Description

Fee Description	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200
Multiple dependent claims	360

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	-	
HP = highest number of total claims paid for, if greater than 20			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	-	
HP = highest number of independent claims paid for, if greater than 3			

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Additional Claim Fee

\$450.00

SUBMITTED BY

Signature	TRA BAL	Registration No. (Attorney/Agent)	44,541	Telephone	908-298-6791
Name (Print/Type)	Thomas A. Blinks			Date	06/03/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number AL01381K			
Substitute for Form PTO-875									
APPLICATION AS FILED – PART I									
(Column 1)		(Column 2)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY			
FOR	NUMBER FILED	NUMBER EXTRA		RATE (\$)	FEE (\$)	RATE (\$)	FEE (\$)		
BASIC FEE (37 CFR 1.16(a), (b), or (c))	N/A	N/A		N/A		N/A			
SEARCH FEE (37 CFR 1.16(k), (l), or (m))	N/A	N/A		N/A		N/A			
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))	N/A	N/A		N/A		N/A			
TOTAL CLAIMS (37 CFR 1.16(i))	57	minus 20 =	37	X	=	X 18	= 666		
INDEPENDENT CLAIMS (37 CFR 1.16(h))	1	minus 3 =	00	X	=	X 84	= 00.00		
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))				N/A		N/A			
* If the difference in column 1 is less than zero, enter "0" in column 2.				TOTAL		TOTAL	666.00		
APPLICATION AS AMENDED – PART II									
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	* 66	Minus	** 57	= 9	X	=	X 50	= 450.00
	Independent (37 CFR 1.16(h))	* 1	Minus	*** 0	= 0	X	=	X 00	= 00.00
	Application Size Fee (37 CFR 1.16(s))								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								
				TOTAL ADD'L FEE		TOTAL ADD'L FEE	450.00		
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDITIONAL FEE (\$)	RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	*	Minus	**	=	X	=	X	=
	Independent (37 CFR 1.16(h))	*	Minus	***	=	X	=	X	=
	Application Size Fee (37 CFR 1.16(s))								
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								
				TOTAL ADD'L FEE		TOTAL ADD'L FEE			
<p>* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</p> <p>** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</p> <p>*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</p> <p>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</p>									

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